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## APPLICANTS

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This application is a DIV of 09/725,352 11/29/2000 PAT 6,685,681

\*\* FOREIGN APPLICATIONS \*\*\*\*\* *MGB*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY IN	SHEETS DRAWING 6	TOTAL CLAIMS 8	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after allowance				
Verified and Acknowledged <i>M.G.B.</i> Examiner's Signature	Initials				

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## TITLE

Vacuum therapy and cleansing dressing for wounds

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input checked="" type="checkbox"/> 1.18 Fees ( Issue )
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